Public attitudes to government intervention to regulate food advertising, especially to children

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Abstract. The World Health Organization has called on governments to implement recommendations on the marketing of foods and beverages to children. This study describes high public support for government intervention in marketing of unhealthy food to children and suggests more effort is needed to harness public opinion to influence policy development.

Received 9 June 2016, accepted 11 November 2016, published online 9 February 2017

Introduction

Childhood obesity is a key public health concern because children who are overweight or obese are more likely to maintain their overweight or obese status and develop cardiometabolic morbidities as adults.¹ In Australia, rates of overweight and obesity in children (2014–15) aged from 5–17 years were 27.4%, increasing from 21.0% in 1995.²

There is increasing evidence that food marketing generates positive beliefs about the foods advertised. Food marketing influences children's nutrition knowledge, food and beverage preferences, purchase requests and behaviours, and food consumption.³

The World Health Organization has called on governments to implement its recommendations on the marketing of foods and non-alcoholic beverages to children.⁴ There has been opposition from the food and beverage industry to government intervention and despite the evidence that banning television advertisements of unhealthy food during children's peak viewing times is one of the most cost-effective population-based obesity-prevention interventions available,⁵ government has been reluctant to act.

In Australia, the National Preventative Health Taskforce recommended that the Australian government phase out unhealthy food marketing on television before 9 p.m. by the end of 2013;⁶ however, this has not occurred.

Public support for regulating food and beverage advertising to children is likely to be a strong motivator for government intervention in this area. Using a representative sample of South Australian adults, this study aimed to explore public attitudes towards government regulation of the advertising of unhealthy foods to children and the mode of regulation.

Methods

Data were collected from July–August 2008 and from June–July 2011 using the South Australian Health Monitor Survey. Households were randomly selected from the Electronic White Pages telephone directory. The person within the household aged 18 years or over with the most recent birthday was selected to participate. The surveys were approved by the South Australian Department for Health and Ageing Human Research Ethics Committee in 2008 and 2011 and participants gave informed consent before participating.

On a five-point Likert scale ranging from strongly agree to strongly disagree, respondents were asked in both years to report their agreement to the same questions, asked in the same manner by trained interviewers. Questions posed included the role of government in regulating advertising to children and respondents' preferred mode of regulation (see Table 1).

Demographic variables including age, sex and whether or not there were children under the age of 18 years living in the household were collected.

Data were analysed using STATA 13.0 (STATA, Texas, USA). In order to represent the South Australian population, data were weighted by age, sex, area (metropolitan or rural) and probability of selection in the household using Census data.

Table 1. The proportion of respondents who strongly agree or agree, or strongly support or support each of the following statements, by demographic (*n* = 3911)

CI, confidence interval; *, significant difference determined by chi-square test at P<0.05; **, significant difference determined by chi-square test at P<0.001

	Attitudes to food ad and government i		Respondents' preferences for modes of regulation			
	Government should regulate the way food or drink is advertised and marketed to children	There is too much advertising of unhealthy food during children's television viewing time	A total ban on ALL food advertising	A ban on ALL food advertising at times when children watch television	A total ban on advertising of unhealthy foods	A ban on advertising of unhealthy foods at times when children watch television
	% (95.0% Cl)	% (95.0% CI)	% (95.0% CI)	% (95.0% Cl)	% (95.0% Cl)	% (95% CI)
Overall	87.0 (85.5–88.3)	75.9 (74.2–77.6)	12.1 (10.9–13.4)	36.2 (34.3–38.2)	60.8 (58.8–62.8)	86.4 (85.0–87.7)
Sex						
Men	85.9 (83.5-88.1)*	74.9 (72.0–77.6)	11.7 (9.9–13.7)	34.6 (31.6–37.7)	56.8 (53.5–60.0)**	84.9 (82.5–87.1)
Women	88.0 (86.3-89.4)	76.9 (74.7–79.0)	12.6 (11.0–14.3)	37.8 (35.4–40.2)	64.7 (62.2–67.1)	87.8 (86.2–89.3)
Children under 18 years old in the household						
Yes	88.8 (86.4–90.8)	78.2 (75.1–81.0)**	11.6 (9.5–14.0)	31.9 (28.5–35.4)**	59.0 (55.4–62.5)	86.8 (84.2-89.1)
No	85.9 (84.1-87.6)	74.6 (72.4–76.8)	12.4 (11.1–14.0)	38.8 (36.5–41.1)	61.9 (59.4–64.3)	86.2 (84.5-87.8)
Age (years)						
18–30	88.5 (86.2-90.5)	71.4 (71.1–77.0)*	9.7 (7.9–11.9)**	31.0 (28.0-34.2)**	47.9 (44.5–51.2)**	86.9 (84.5–89.1)
31–65	87.2 (85.6-88.5)	75.8 (74.0–77.5)	10.9 (9.7–12.3)	33.9 (32.0–35.9)	61.4 (59.4–63.4)	86.6 (85.2-88.0)
65+	84.8 (82.1-87.1)	78.5 (75.4–81.2)	18.4 (15.8–21.3)	48.9 (45.4–52.4)	73.3 (70.1–76.3)	85.3 (82.7-87.7)

Responses on the Likert scale were combined to create three categories: strongly agree or agree, neither agree nor disagree, and strongly disagree or disagree; or strongly support or support, neither support nor oppose, and strongly oppose or oppose. All variables were categorical, described using frequencies and proportions and compared using chi-square tests.

Results

In 2008, 1910 interviews were completed (participation rate: 60.8%) and 2001 interviews were completed in 2011 (participation rate: 57.3%). Consistent demographic data allowed data from both years to be pooled for analysis (n = 3911). Mean age was 47.4 ± 18.3 years, 48.7% were men and 36.5% households had a child under 18 years.

All participants indicated strong agreement that governments should regulate the way food or drink is advertised and marketed to children (Table 1). Women were more likely than men to hold this view (P = 0.039). Furthermore, 75.9% of respondents either agreed or strongly agreed that there was too much advertising of unhealthy food during children's television viewing time with differences found across age groups (P = 0.011) and between those with and without children under 18 years in the household (P < 0.001) (Table 1).

When respondents were asked about their support for different methods of government regulation, a high proportion of respondents supported a ban on advertising of unhealthy foods at times when children watch television (86.4%). Women were more likely to support a total ban on advertising of unhealthy foods than men (P < 0.001) and support for this statement increased with age (P < 0.001). Households without children were more likely to support a ban on all food advertising when children are watching television

(P < 0.001) and support for this statement increased with age (P < 0.001). A support for a total ban on all food advertising increased with increasing age (P < 0.001) (Table 1).

Discussion

This study suggests strong support by South Australian adults for government intervention to restrict or ban television advertising of unhealthy food and non-alcoholic beverages, especially to children. Consistent with other Australian studies,^{7–9} over 86.0% of respondents strongly agreed or agreed with banning the advertising of unhealthy food during children's television viewing time. When investigating public acceptability of various forms of regulation to support a healthy eating environment, Morley *et al.* (2012) found 83.0% of Australian adults were in favour of a ban on advertising unhealthy food at times when children watch television. Furthermore, 92.0% of respondents supported restrictions to food advertising on free to air television.⁸ Similarly, a Western Australian study reported 84.0% of respondents assessed government control or regulation of food advertising as either quite important (34.0%) or very important (50.0%).⁹

Public opinion on this issue remains aligned with the views and interests of non-government groups who recommend banning unhealthy food advertising on television before 9 p.m.,¹⁰ as well as with past state and territory government views and federally commissioned advice.⁶

Whilst this data was collected several years ago, this study reiterates continued public support for government regulating the television advertising of unhealthy food to children, especially during children's peak viewing times. Decisive federal government leadership is

needed to implement policy responses to proactively regulate and monitor the marketing of unhealthy foods to children. Concerted policy actions consistent with public support would progress efforts to implement international recommendations to reduce childhood obesity.

References

- Reilly JJ, Kelly J. Long-term impact of overweight and obesity in childhood and adolescence on morbidity and premature mortality in adulthood: systematic review. Int J Obes 2011; 35(7): 891–8. doi:10.1038/ijo.2010.222
- Australian Bureau of Statistics. National Health Survey: First Results, 2014–2015 Catalogue Number: 4364.0.55.001. Canberra: Australian Bureau of Statistics; 2015.
- Cairns G, Angus K, Hastings G, Caraher M. Systematic reviews of the evidence on the nature, extent and effects of food marketing to children. A retrospective summary. *Appetite* 2013; 62: 209–15. doi:10.1016/j.appet.2012.04.017

- World Health Organization. Set of recommendations on the marketing of foods and non-alcoholic beverages to children. Geneva, Switzerland: World Health Organization; 2010.
- Magnus A, Haby MM, Carter R, Swinburn B. The cost-effectiveness of removing television advertising of high-fat and/or high-sugar food and beverages to Australian children. *Int J Obes* 2009; 33(10): 1094–102. doi:10.1038/ijo.2009.156
- National Preventative Health Taskforce. Australia: the healthiest country by 2020 National Preventative Health Strategy – the roadmap for action. Canberra, Australia: Commonwealth of Australia; 2009.
- Morley B, Chapman K, Mehta K, King L, Swinburn B, Wakefield M. Parental awareness and attitudes about food advertising to children on Australian television. *Aust NZ J Publ Heal* 2008; **32**(4): 341–7. doi:10.1111/j.1753-6405.2008.00252.x
- Morley B, Martin J, Niven P, Wakefield M. Public opinion on food-related obesity prevention policy initiatives. *Health Promot J Austr* 2012; 23(2): 86–91.
- Pollard CM, Daly A, Moore M, Binns CW. Public say food regulatory policies to improve health in Western Australia are important: population survey results. *Aust NZ J Publ Heal* 2013; 37(5): 475–82. doi:10.1111/1753-6405.12128
- Cancer Council Australia. Position statement Food marketing to children. Cancer Council Australia. 2015. Available from: http://wiki.cancer.org.au/policy/ Position_statement_-_Food_Marketing_to_children [Verified 4 November 2015]